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FACSIMILE TRANSMISSION COVER SHEET

Date: October 21, 2004

To: United States Patent and Trademark Office
Examiner: Ron Everett Pompey; Art Unit: 2812

Fax: (703) 872-9306

Re: **Application Serial No.: 09/826,472**
Filing Date: 4/4/2001; First Named Inventor: Bin Yu
Attorney Docket No.: 0180197

From: Farjami & Farjami LLP

Number of pages including the cover sheet: 14

Message:

Enclosed please find the Response to the Final Office Action dated September 22, 2004.

Thank you.

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Attorney Docket No.: 0180197

AMENDMENT COVER SHEETIN RE APPLICATION OF: Yu, BinSERIAL NO.: 09/826.472 FILED: 04/04/2001FOR: Method of Fabricating a Semiconductor Device Having a Nitride/High-k/Nitride Gate Dielectric Stack by Atomic Layer Deposition (ALD) and a Device Thereby Formed

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Transmitted herewith is a paper in the above-identified application. Any necessary extension of time period set for this paper is hereby requested.

☒ No additional fee is required.

☐ The fee has been calculated as shown below:

☐ EXTENSION FEE

	RATE Non-Small Entity	RATE Small Entity	FEE
FIRST MONTH AFTER TIME PERIOD SET	110.00	55.00	\$
SECOND MONTH AFTER TIME PERIOD SET	430.00	215.00	\$
THIRD MONTH AFTER TIME PERIOD SET	980.00	490.00	\$
FOURTH MONTH AFTER TIME PERIOD SET	1,530.00	765.00	\$

☐ TOTAL EXTENSION FEE \$ 0.00

☐ FEE FOR EXTRA CLAIMS added by Amendment in this response:


	Column 1 Number of Claims after Amendment	Column 2 Number Previously Paid for	Column 3 Number of Extra Claims	RATE Non-Small Entity	RATE Small Entity	FEE
TOTAL CLAIMS	18	MINUS **20	* = 0	x 18	x 9	\$
INDEPENDENT	2	MINUS ***3	* = 0	x 88	x 44	\$
First presentation of multiple dependent claim				+ 300	+ 150	\$

TOTAL FEE FOR EXTRA CLAIMS \$ 0.00

- * If the entry in Column 1 is less than the entry of Column 2, write "0" in Column 3.
 ** If the number of Total Claims previously paid for is less than 20, write "20" in this space.
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Attorney Docket No.: 0180197

- ☐ Total fee for Supplemental Information Disclosure Statement \$
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Date: 10/21/04By: 
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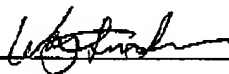
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